

CEDAR CREST HEALTH CENTER
1702 SOUTH RIVER ROAD
JANESVILLE 53546

Facility ID: 2090

Page 1

JANESVILLE	53546	Phone:(608) 756-0344
Operated from 1/1 To 12/31	Days of Operation:	365
Operate in Conjunction with Hospital?		No
Number of Beds Set Up and Staffed (12/31/05):		95
Total Licensed Bed Capacity (12/31/05):		95
Number of Residents on 12/31/05:		89

Ownership:	Non-Profit Corporation
Highest Level License:	Skilled
Operate in Conjunction with CBRF?	Yes
Title 18 (Medicare) Certified?	Yes
Title 19 (Medicaid) Certified?	Yes
Average Daily Census:	90

Age, Gender, and Primary Diagnosis of Residents (12/31/05)				Length of Stay (12/31/05)		%	
Primary Diagnosis		%	Age Groups		%		
Developmental Disabilities		0.0	Under 65		2.2	Less Than 1 Year	38.2
Mental Illness (Org./Psy)		25.8	65 - 74		6.7	1 - 4 Years	32.6
Mental Illness (Other)		3.4	75 - 84		36.0	More Than 4 Years	29.2
Alcohol & Other Drug Abuse		0.0	85 - 94		42.7		100.0
Para-, Quadra-, Hemiplegic		1.1	95 & Over		12.4	-----	
Cancer		3.4			-----	Full-Time Equivalent	
Fractures		10.1			100.0	Nursing Staff per 100 Residents	
Cardiovascular		6.7	65 & Over		97.8	(12/31/05)	
Cerebrovascular		18.0	-----			-----	
Diabetes		7.9	Gender		%	RNs	13.4
Respiratory		3.4	-----			LPNs	11.7
Other Medical Conditions		20.2	Male		19.1	Nursing Assistants,	
		-----	Female		80.9	Aides, & Orderlies	
		100.0			-----		48.4
					100.0		

Method of Reimbursement

Level of Care	Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care		Managed Care		Total Resi- dents	% Of All	
	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)				
Int. Skilled Care	0	0.0	0	6	12.2	148	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	6	6.7
Skilled Care	9	100.0	335	43	87.8	127	0	0.0	0	30	96.8	194	0	0.0	0	0	0.0	82	92.1
Intermediate	---	---	---	0	0.0	0	0	0.0	0	1	3.2	194	0	0.0	0	0	0.0	1	1.1
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Personal Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Residential Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Total	9	100.0		49	100.0		0	0.0		31	100.0		0	0.0		0	0.0	89	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/05				

Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total
		Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Number of Residents
Private Home/No Home Health	6.9	Bathing	0.0	89.9	10.1	89
Private Home/With Home Health	0.8	Dressing	1.1	89.9	9.0	89
Other Nursing Homes	6.1	Transferring	6.7	79.8	13.5	89
Acute Care Hospitals	77.1	Toilet Use	4.5	85.4	10.1	89
Psych. Hosp.-MR/DD Facilities	0.0	Eating	43.8	47.2	9.0	89
Rehabilitation Hospitals	1.5	*****				
Other Locations	0.0					
Total Number of Admissions	131	Continence		%	Special Treatments	%
Percent Discharges To:		Indwelling Or External Catheter	12.4		Receiving Respiratory Care	11.2
Private Home/No Home Health	9.3	Occ/Freq. Incontinent of Bladder	62.9		Receiving Tracheostomy Care	0.0
Private Home/With Home Health	23.3	Occ/Freq. Incontinent of Bowel	41.6		Receiving Suctioning	0.0
Other Nursing Homes	1.6				Receiving Ostomy Care	6.7
Acute Care Hospitals	6.2	Mobility			Receiving Tube Feeding	5.6
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained	1.1		Receiving Mechanically Altered Diets	33.7
Rehabilitation Hospitals	0.0					
Other Locations	0.0	Skin Care			Other Resident Characteristics	
Deaths	34.9	With Pressure Sores	5.6		Have Advance Directives	93.3
Total Number of Discharges		With Rashes	11.2		Medications	
(Including Deaths)	129				Receiving Psychoactive Drugs	68.5

Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Nonprofit Peer Group %	Ratio	Bed Size: 50-99 Peer Group %	Ratio	Licensure: Skilled Peer Group %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	94.7	93.4	1.01	86.3	1.10	88.8	1.07	88.1	1.08
Current Residents from In-County	93.3	85.9	1.09	80.0	1.17	83.2	1.12	77.6	1.20
Admissions from In-County, Still Residing	22.9	20.9	1.10	18.8	1.22	18.7	1.22	18.1	1.26
Admissions/Average Daily Census	145.6	162.7	0.89	180.5	0.81	177.7	0.82	162.3	0.90
Discharges/Average Daily Census	143.3	162.0	0.88	178.7	0.80	179.2	0.80	165.1	0.87
Discharges To Private Residence/Average Daily Census	46.7	81.3	0.57	87.1	0.54	83.4	0.56	74.8	0.62
Residents Receiving Skilled Care	98.9	97.5	1.01	96.4	1.03	96.3	1.03	92.1	1.07
Residents Aged 65 and Older	97.8	96.3	1.02	93.5	1.05	91.3	1.07	88.4	1.11
Title 19 (Medicaid) Funded Residents	55.1	54.2	1.02	59.0	0.93	61.8	0.89	65.3	0.84
Private Pay Funded Residents	34.8	31.8	1.10	24.5	1.42	22.5	1.55	20.2	1.73
Developmentally Disabled Residents	0.0	0.5	0.00	0.8	0.00	1.1	0.00	5.0	0.00
Mentally Ill Residents	29.2	33.9	0.86	31.6	0.93	34.8	0.84	32.9	0.89
General Medical Service Residents	20.2	25.2	0.80	26.1	0.78	23.0	0.88	22.8	0.89
Impaired ADL (Mean)	49.7	49.3	1.01	47.8	1.04	48.4	1.03	49.2	1.01
Psychological Problems	68.5	57.5	1.19	57.6	1.19	59.5	1.15	58.5	1.17
Nursing Care Required (Mean)	9.3	6.9	1.35	7.0	1.33	7.2	1.29	7.4	1.25